

Prime Recipient

Reporting Information

Award Type*	Award Number*	Final Report*
Grant	H390A090010	N

Award Recipient Information

Recipient DUNS Number*	Recipient Account Number	Recipient Congressional District*
070596341	S9-07-14-02	01

Award Information

Funding Agency Code*	Awarding Agency Code*	Award Date*
9124	9124	03/31/2009
Amount of Award*	CFDA Number*	
\$135,000.00	84.390	
Program Source (TAS)*	Sub Account Number for Program Source (TAS)	
91-0302		
Total Number of Sub Awards to Individuals*	Total Amount of Sub Awards to Individuals*	
0.00	\$0.00	
Total Number of Payments to Vendors less than \$25,000/award*	Total Amount of Payments to Vendors less than \$25,000/award*	
0.00	\$0.00	
Total Number of Sub Awards less than \$25,000/award*	Total Amount of Sub Awards less than \$25,000/award*	
0.00	\$0.00	

Award Description*

Assist in operating statewide comprehensive, coordinated, effective, efficient and accountable programs of vocational rehabilitation, which are an integral part of a statewide workforce investment system; and designed to assess, plan, develop, and provide vocational rehabilitation services for individuals with disabilities, consistent with their strengths, resources, priorities, concerns, abilities, capabilities, interests, and informed choice, so that such individuals may prepare and engage in gainful employment.

Number of characters entered: 518

Project Information

Project Name or Project/Program Title*	Project Status*	Total Federal Amount ARRA Funds Received/Invoiced*
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Vocational Rehabilitation Services to States, Recovery Act		Not Started	\$0.00
Number of Jobs*		Description of Jobs Created*	
0.00		N/A Number of characters entered: 3	
Quarterly Activities/Project Description*			
Assist in operating statewide comprehensive, coordinated, effective, efficient and accountable programs of vocational rehabilitation, which are an integral part of a statewide workforce investment system; and designed to assess, plan, develop, and provide vocational rehabilitation services for individuals with disabilities, consistent with their strengths, resources, priorities, concerns, abilities, capabilities, interests, and informed choice, so that such individuals may prepare and engage in gainful employment. Number of characters entered: 518			
Activity Code (NAICS or NTEE-NPC)*			
1 J04	2		
3	4		
5	6		
7	8		
9	10		
Total Federal Amount of ARRA Expenditure*	Total Federal ARRA Infrastructure Expenditure	Infrastructure Contact Name	
\$0.00	\$0.00		
Infrastructure Contact Email	Infrastructure Contact Phone	Infrastructure Contact Phone Ext	
Infrastructure Contact Street Address 1	Infrastructure Contact Street Address 2	Infrastructure Contact Street Address 3	
Infrastructure City	Infrastructure State	Infrastructure ZIP Code+4	
Infrastructure Purpose and Rationale			

N/A

Number of characters entered: 3

Primary Place of Performance		
Street Address 1	Street Address 2	City*
1901 N Dupont Highway	DHSS Campus, Biggs Bldg	New Castle
State*	ZIP Code+4*	Congressional District*
DE	197201199	01
Country*		
US		

Recipient Highly Compensated Officers			
Prime Recipient Indication of Reporting Applicability*	#	Officer Name	Officer Compensation
No	1		
	2		
	3		
	4		
	5		